

022504

17439 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	60705-1352
	First Inventor	Eichrodt et al.
	Title	System And Method For Implementing A Delta-Sigma Modulator Integrity Supervisor
	Express Mail Label No.	EL993865032US

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
----------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------


1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See CFR 1.27 3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> [Total Pages 26] - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed. Sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 9] 5. Oath or Declaration [Total Pages 3] a. <input type="checkbox"/> Newly Executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

ACCOMPANYING APPLICATION PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & Documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/640,123.
 Prior application information: **Examiner Cornelius, Jean B.** Group / Art Unit: **2631**
 For CONTINUATION OR DIVISIONAL APPS only: the entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number: 24504		OR <input type="checkbox"/> Correspondence address below:			
NAME	Daniel R. McClure Thomas, Kayden, Horstemeyer & Risley, L.L.P.				
ADDRESS	100 Galleria Parkway Suite 1750				
CITY	Atlanta	STATE	Georgia	ZIP CODE	30339-5948
COUNTRY	U.S.A.	TELEPHONE	770-933-9500	FAX	770-951-0933

Name (Print/Type)	Daniel R. McClure	Registration No. (Attorney/Agent)	38,962
Signature			Date
			2-25-04

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revisions.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**810.00**

Complete If Known

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Eichrodt et al.
Examiner Name	Unassigned
Group / Art Unit	Unassigned
Attorney Docket No.	60705-1352

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number

20-0778

Deposit Account Name

Thomas, Kayden, Horstemeyer Risley, L.L.P.

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility Filing Fee	770
1002	340	2002	170	Design Filing Fee	
1003	530	2003	265	Plant Filing Fee	
1004	770	2004	385	Reissue Filing Fee	
1005	160	2005	80	Provisional Filing Fee	
SUBTOTAL (1)					(\$) 770

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee From Below	Fee Paid
Total Claims	9	- 20** = 0	X 18.00 = 0
Independent Claims	1	- 3** = 0	X 86.00 = 0
Multiple Dependent	0		290.00 = 0

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$) 0

**or number previously paid, if greater; For Reissues, see above

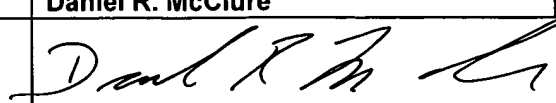
FEES CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge-late filing fee or oath	
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive-unavoidable	
1453	1,330	2453	655	Petition to revive-unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee for provisional application	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each add. invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited exam. of a design application	
Other fee (specify)					
SUBTOTAL (3)					(\$) 40

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name	Daniel R. McClure	Registration No.	38,962	Telephone Number	770-933-9500
Signature		Date	2-25-04		

WARNING: Information on this form may become public. Credit Card Information should not

Be included on this form. Provide credit card information and authorization on PTO-2038

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 USC 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: **Eichrodt et al.**For: **SYSTEM AND METHOD FOR IMPLEMENTING A DELTA-SIGMA MODULATOR INTEGRITY SUPERVISOR****CERTIFICATE OF EXPRESS MAIL**

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

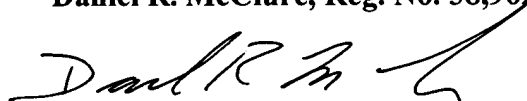
Sir:

Enclosed for filing in the above case are the following documents:

Return Postcard
Utility Patent Application Transmittal Page
Fee Transmittal Page
Utility Patent Application Consisting Of:
 18 Pages of Specification
 7 Pages of Claims (Claims 35-43)
 1 Page of Abstract
 9 Pages of Formal Drawings (Fig(s). 1-8)
Declaration (executed, from parent)
Credit Card Authorization Form (Amount: \$810.00)
Assignment/Recordation Form Cover Sheet (from parent)
Preliminary Amendment
IDS/PTO Form 1449

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Respectfully submitted,

Daniel R. McClure, Reg. No. 38,962**THOMAS, KAYDEN, HORSTEMEYER
& RISLEY, L.L.P.**

100 Galleria Parkway, N.W.
Suite 1750
Atlanta, Georgia 30339-5948

Our Docket No: **60705-1352**

I hereby certify that all correspondence listed above are being deposited for delivery to the above addressee, with the United States Postal Service "**EXPRESS MAIL POST OFFICE TO ADDRESSEE**" service under 37 CFR §1.10 on the date indicated below:

The envelope has been given U.S. Postal Service "Express Mail Post Office To Addressee" Package # **EL993865032US**.

Date: February 25, 2004
Hui-Chin Barnhill